Quantity Purchase Agreement Qty Purchase Agreement QPA Number With The State Of Indiana 000000000000000000000009484

DIAGNOSTIC HYBRIDS INC Vendor 350 WEST STATE STREET Remit to:

ATHENS OH 45701

DIAGNOSTIC HYBRIDS INC Name and Address Cntct: Lisa West

of Vendor: 350 WEST STATE STREET

ATHENS OH 45701

Requisition Nbr.: A70-3-533 01/02/2003 Effective Date: 01/01/2005 **Expiration Date:**

Agency Number:

Facility: IN STATE DEPT. OF HEALTH

Page 1 **of** 2

31-1050325 Vendor Federal ID: Vendor Telephone Nbr: 740-593-1784--Name Of Contact Pers: Lisa West **FAX Number:** 740-593-0980--

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement. Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number	Quantity UNI	T Article and Description	Unit Price
1	999,999,999.00 EA	18760 Primary Rhesus Monkey Kidney Cell Culture Tube, 16x125mm, with SV5/40 Antisera. 150 Tubes/Week. 49-0600A	1.5500
2	999,999,999.00 EA	18761 Primary Rhesus Monkey Kidney Cell Cultures Snap Top Dram with Coverslip and SV5/40 Antisera. 100 dram/week. 49-0102A	1.5500
3	999,999,999.00 EA	18762 Primary Rhesus Monkey Kidney Cell Culture Plate, 96 Well, with SV5/40 Antisera. Ship as Requested. 49-9696A	150.0000
4	999,999,999.00 EA	18764 Primary Rhesus Monkey Kidney Cell Culture Ampule, Cryopreserved, 4ml, with SV5/40 Antisera. Ship as Requested. 20 mm cells/1.8 ml. 49-0002A	249.9500
5	999,999,999.00 EA	18765 MRC-5 Human Embryonic Lung Cell Culture Tube, 16x125mm. 100 tubes/week. 51-0600	1.1000
6	999,999,999.00 EA	18766 MRC-5 Human Embryonic Lung Cell Culture Snap Top Dram with Coverslip. 100 dram/week. 51-0102	1.1500
7	999,999,999.00 EA	18767 A549 Human Lung Carcinoma Cell Culture Tube, 16x125mm, 100 tubes/week. 56-0600	1.1000
8	999,999,999.00 EA	18768 A549 Human Lung Carcinoma Cell Culture Snap Top Dram with Coverslip. Ship as Requested. 56-0102	1.1500
9	999,999,999.00 EA	18769 A549 Human Lung Carcinoma Cell Culture Ampule, Cryopreserved, 4ml. Ship as Requested. 56-00100	110.0000
10	999,999,999.00 EA	18770 RD Rhabdomyosarcoma Cell Culture Plate, 96 Well. Ship as Requested. 76-9696	69.1200
11	999,999,999.00 EA	18772 RD Rhabdomyosarcoma Cell Culture Plate, Ampule, Cryopreserved, 4ml. Ship as Requested. 21-00100	110.0000
12	999,999,999.00 EA	18773 LLC-MK2 Cell Culture Plate, 96 Well. Ship as Requested. 86-9696	74.3000
13	999,999,999.00 EA	18775 LLC-MK2 Cell Culture Ampule, Cryopreserved, 4ml. Ship as Requested. 86-0010	110.0000
14	999,999,999.00 EA	18776 McCoy Cell Culture Ampule, Cryopreserved, 4ml. Ship as Requested. 54-00100	110.0000
15	999,999,999.00 EA	00000000100004161 Culture,Hep-2,Epidermoid,Human,4Milliliter,CarcinomaCell,Ampule,Cryopreserved,ShipAsRequested	110.0000
16	999,999,999.00 EA	00000000100004162 Culture,Plate,Kidney,Cell,4Milliliter,AfricanGreenMonkey,Vero,Ampule,Cryopreserved,ShipAsRequested	119.0000

DIAGNOSTIC HYBRIDS INC Vendor 350 WEST STATE STREET Remit to:

ATHENS OH 45701

DIAGNOSTIC HYBRIDS INC Name and

Address Cntct: Lisa West

of Vendor: 350 WEST STATE STREET

ATHENS OH 45701

Requisition Nbr.: A70-3-533 01/02/2003 **Effective Date:** 01/01/2005 **Expiration Date:**

Agency Number:

Facility: IN STATE DEPT. OF HEALTH

Page 2 of 2

31-1050325 Vendor Federal ID: Vendor Telephone Nbr: 740-593-1784--Name Of Contact Pers: Lisa West 740-593-0980--**FAX Number:**

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement. Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

UNIT **Unit Price** Line Number Quantity **Article and Description**

Signature of Purchasing Officer	Typed Name	Signature Of Approval Office Of the State Attorney General	
	Date Signed	Typed Name	Date Signed
Authorized Signature Indiana Department Of Administration Procurement Division 402 West Washington Street, Rm W468 Indianapolis, Indiana 46204 Telephone: (317) 232-3053			